Benefit Focus News

March 2013

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New Pharmacy Benefits Manager!

The State of Idaho and Blue Cross of Idaho continually strive to provide the lowest cost to members. In order to help members save money on pharmaceutical costs, CVS Caremark is the new pharmacy benefits manager (PBM) for Blue Cross members effective April 1, 2013.

The change in PBM does not affect your coverage. The formulary, your benefits and drug coverage will remain the same. In addition, Walgreens is still <u>not</u> part of the preferred pharmacy network. To find a preferred pharmacy, please visit <u>bcidaho.com</u> and select *Pharmacy*.

A letter has been distributed via mail to all members regarding the change. Please follow the link for a <u>copy of</u> the letter.



The Office of Group Insurance would like to remind you of the eligibility requirements for dependents in each of our plans. Eligible dependents include the following:

- (1) Your legal spouse; and/or
- (2) Your or your legal spouse's children up to their 26th birthdays, unless the dependent children are eligible to enroll in their own employer based group coverage.

The term "children" includes natural children, stepchildren, adopted children, or children in the process of adoption from time placed with you. The term "children" also includes children legally dependent upon you or your spouse for support where a normal parent-child relationship exists with the expectation that you will continue to rear that child to adulthood. However, if one or both of that child's natural parents live in the same household with you, a parent-child relationship shall not be deemed to exist even though you or your spouse provides support.

There are many situations that may make it unclear as to whether or not one is dependent eligible. For example if you are divorced, please be aware that an ex-spouse is not eligible for coverage in our group plans, even if you have been mandated to pay for health insurance in a divorce decree.

If you have any dependent eligibility questions, please contact the Office of Group Insurance.



Patient Protection and Affordable Care Act (PPACA) March 2013 Update

What is OGI doing about PPACA?

The Patient Protection and Affordable Care Act (PPACA) was signed into law on March 23, 2010. Information is beginning to trickle out; however, there are still many issues yet to be determined. We want to keep you informed on what Group Insurance is doing on this subject.

First, the State plan has been granted "Grandfathered Status". This status was originally thought to expire in 2014; however that is no longer the case and we will retain this status as long as we can. With a grandfathered plan we are not required to implement all the provisions of PPACA. Some of the provisions are universal regardless of grandfathered status and some are not, we are working with our carrier to identify required changes. In addition, a Summary of Benefits & Coverage will be made available to all employees no later than the first day of Open Enrollment.

Finally, we are evaluating our work force to ensure that we meet the safe harbor rules to avoid the shared responsibility penalties. Since not all agencies use the State Controller's Office payroll system we may be contacting your agency for more information. In turn we will notify you of any pending issues as they become apparent. We have created a "PPACA Corner" on our website under the Payroll & H/R section so please refer to it regularly for progress updates.

We understand this is a complex issue and we want to assure you that we are doing all we can to make the process as clear as possible. Thank you for your patience.

Did You Know?

The State Controller's Office currently supports only Internet Explorer 7.0 and 8.0.

If you are accessing medical, dental or FSA enrollment forms online through SCO, Internet Explorer 7.0 or 8.0 is required.

For more information and troubleshooting, please click here.

For comments or suggestions for future editions of Benefit Focus, please email: ogi@adm.idaho.gov.



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